Food Insecurity: An Overview and the Impact Among Hispanic/Latino Ohioans





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The Ohio Commission on Hispanic/Latino Affairs ("OCHLA") put forth its best efforts in gathering and providing accurate and current information. This report contains data from the latest research available. Upon request, OCHLA will provide any additional information or data available.

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Introduction

Ohio's population has experienced rapid diversification in recent decades. One group that has grown exponentially is the Hispanic/Latino (HL) community. From 2000 to 2017, Ohio's Hispanic/Latino population doubled and accounted for 3.7% of the state's total population that year. By 2018, the American Community Survey indicated that Ohio's Hispanic/Latino population comprised nearly 456,000 people, accounting for 3.9% of the state's total population of 11,689,442 residents. That accounts for a population increase of nearly 19,000 Hispanic/Latino Ohioans in just one year.

The expanding Hispanic/Latino demographic in Ohio presents unique challenges and opportunities for policy makers, community leaders, and our state. In this edition of the Latino Community Report, we investigate the topic of food insecurity and its potential impact on the Hispanic/Latino Ohioan community. We will discuss the effects that income inequality, lack of access to transportation, food deserts, education attainment levels, social isolation, and migration from city clusters to rural regions may have for the Hispanic/Latino Ohioan community in relation to food insecurity.

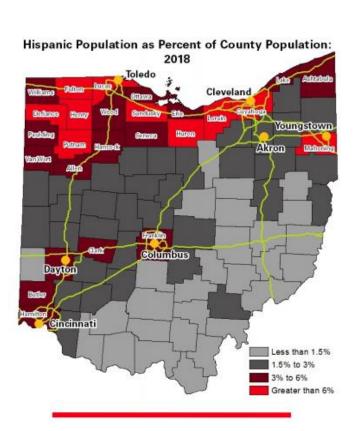
Food insecurity is the state of being without reliable access to a sufficient quantity of affordable, nutritious food.² While there is very little data available regarding food insecurity and its impact on Hispanic/Latino Ohioans, we know that it is a problem and that certain socioeconomic factors play a role in its cycle. The following report points to the intricacies of our Hispanic/Latino Ohioan population, the complexities of food insecurity, and what steps we can take to prevent and alleviate the burden it has on Ohio families.

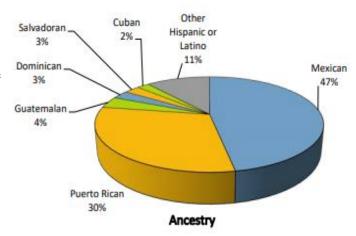


An Overview of the Hispanic/Latino Population in Ohio

Traditionally, Ohio's HL population is comprised of primarily those of Mexican or Puerto Rican heritage. However, Central America is becoming a more common point of ancestry. Nearly 33,000 HL Ohioans have roots in Central America—mostly from Guatemala and El Salvador.¹

One-fifth, or over 93,000 Hispanic/Latino Ohioans, are foreign born. Over 24,000 of the foreign born population of the HL community have arrived since 2010. Thirty-four percent of them have become naturalized citizens since coming to the United States. Eighty percent of Hispanic/Latino Ohioans speak only English or report speaking English "very well".

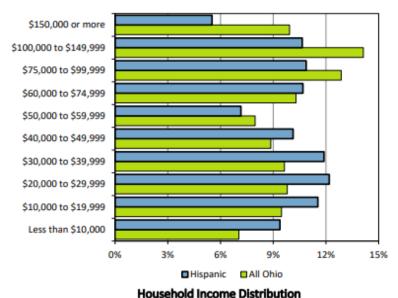




"The [U.S. Census]
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population."

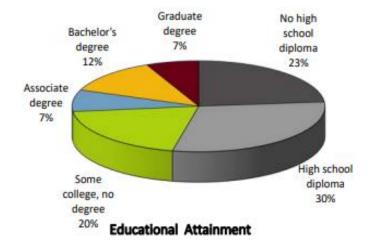
The Hispanic/Latino community is well-represented throughout the state; the majority resides in metropolitan areas with one-third concentrated in just four cities (map). Columbus is currently home to over 54,000 HL residents, followed by 47,000, 25,000 and 19,000 in Cleveland, Toledo and Lorain respectively.¹

The number of Hispanic/Latino Ohioans in the civilian labor force is almost 212,000. HL Ohioans have an unemployment rate of 7.3%.



The median household income for all Ohio households is \$56,000. The median income of Hispanic/Latino Ohioans is lower at \$45,000. Mexican immigrant households have a median income of \$43,000 and Central American immigrant households have a median income of \$36,000. These figures are significant because the combined population of Mexican and Central American ancestry HL Ohioans represent 57% of that population, increasing the probability that extensive numbers of this population being impacted by food insecurity due to low income.¹

Income inequalities are reflected in the number of Hispanic/Latino Ohioan families who live below the poverty line, and research shows that 24% of HL Ohioans live below the poverty line. Nineteen percent of those households received Food Stamps within the past year and 44% of those households have children younger than 5 years of age. Furthermore, 30% of the population is under the age of 15 and nearly 34% of Hispanic/Latino families with children consist of single mothers thus increasing the impact of food insecurity and poverty in this



population. This information is relevant considering that in Ohio's elementary and secondary schools, there are over 117,000 HL students enrolled, making up 6.2% of the state's total student body.

Another important factor affecting quality of life is educational attainment. In Ohio, the Hispanic/Latino's educational attainment lags all others in the state. For example, 38% percent of all Ohioans have obtained a post-secondary degree while 27% of Hispanic/Latino Ohioans have achieved the same. Additionally, recent HL adult immigrants tend to have a lower educational attainment level than Ohio's overall population.¹

What Is Food Insecurity?

The U.S. Department of Agriculture (USDA) defines food insecurity as a lack of consistent access to enough food for an active, healthy life. In 2018, an estimated 1 in 9 Americans were food insecure, which equates to over 37 million Americans. This includes more than 11 million children nationwide.³

According to the Ohio Association of Foodbanks, which serves one in six Ohioans each year, 1.75 million Ohioans are food insecure. In fact, the USDA ranked Ohio as the 9th worst state in the nation for very low food security between 2015-2017, meaning that approximately 285,000 Ohio households contain members with "reduced food intake or disrupted eating patterns" because they do not know from where their next meal will come.⁴ About 1 in 5 Ohio children live in households that cannot afford food on their own, meaning that nearly 510,030 Ohio children are food insecure.⁵

Barriers to consistent access of food include but are not limited to lack of affordable housing, lack of access to transportation, social isolation, chronic or acute health problems, high medical costs, and low wages, which are all essential social determinants of health. If a person cannot meet their recommended daily caloric intake on a consistent basis because they do not have the financial resources to do so, they are considered food insecure.⁶ Unreliable access to a normal quality of food is associated with poorer diet quality, higher prevalence of chronic diseases, higher health care costs, therefore adding up to overall poorer health.⁷

Food insecurity is not the same as hunger. While food insecurity is a socio-economic problem brought on by a lack of financial resources to purchase adequate and nutritious food, hunger is the physical sensation of discomfort at the personal level. The two are intrinsically linked to one another, because hunger is very often a consequence of food insecurity. Furthermore, there are four levels of food security, which describe the range of a household's access to food as shown below.³

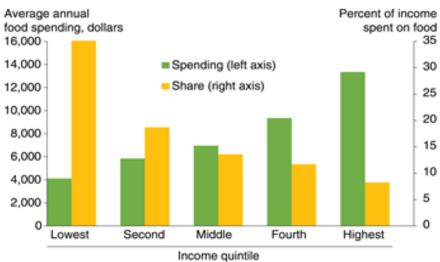


What Causes Food Insecurity?

The most common cause for food insecurity is low economic status. When a household's combined

income is less than the federal poverty level (\$25,750 for a 4 member household)⁸, they face drastically higher rates of food insecurity. Lower income families will spend a greater percentage of their resources on food when compared families with higher incomes. According USDA statistics from 2018, households in the lowest income quintile spent an average of \$4,109 on food, which is 35.1%

Food spending and share of disposable income spent on food across U.S. households, 2018 Average annual Percent of



Source: USDA, Economic Research Service using data from U.S. Bureau of Labor Statistics, Consumer Expenditure Survey, 2018.

of their income. Households in the highest income quintile spent an average of \$13,348 on food, which is 8.2% of their income. This means that families in the lowest income quintile range spent more than 4 times in terms of the percentage of their income on food compared to their richest counterparts.⁹

Physical access to food and its relationship to neighborhoods is another factor. For example, households in some urban areas, a significant number of rural areas, and low-income neighborhoods have limited access to full-service supermarkets or grocery stores. Areas like these, with little to no access to healthy, adequate food, are called food deserts. Households within these areas normally rely on convenience stores or independent stores, which typically offer a smaller variety of lower quality foods with higher prices. In neighborhoods with limited transportation options, higher rates of food insecurity are prevalent because residents must travel greater distances to access healthy foods at a grocery store.¹⁰

Food Insecurity Across America: 2008 Recession

Following the 2008 recession, a significant number of American households experienced a period of financial crisis, leading to an increase in food insecurity levels (14.9% in 2011). While the economy has largely recovered and the poverty rate is back to pre-recession levels of 12.3%, 12 the country is still experiencing the lasting effects of food insecurity with 11.1% of Americans experiencing food insecurity and over 13% of all households with children experiencing food insecurity. 13

The Recession's Impact on Hispanics/Latinos



Source: USDA, Economic Research Service, using data from the December 2015, 2016, and 2017 Current Population Survey Food Security Supplements.

U.S.-Born Hispanic/Latino workers have still not 2016, and 2017 Current Population Survey Food Security Supplements. completely recovered from the recession. According to a Pew Research Center analysis, the income for U.S.-Born Hispanics/Latinos is 6% less in 2017 than in 2007. This failure to regain pre-recession levels is because U.S.-Born Hispanic/Latino workers experienced significantly greater financial loss than other U.S.-Born workers did. This economic loss led to greater rates of poverty, resulting in greater rates of food insecurity in the Hispanic/Latino population. 14

Across the United States, minority populations are disproportionately impacted by food insecurity. 21.2% of African-American households and 16.2% of Hispanic/Latino households experience some form of food insecurity. Meanwhile, the national average of food insecurity is 11.1%. This disparity is especially concerning because these minority communities are often shown to have lower overall household incomes and higher health risks than the national averages.

Food Insecurity in Urban vs. Rural Areas

The rural-urban dichotomy plays a major role when analyzing food insecure neighborhoods because rural (nonmetropolitan) counties make up 63% of all U.S. counties, but make up 79% of counties with the highest rates of food insecurity. Households in rural areas have higher rates of food insecurity (12.7%), when compared to the national average (11.1%). There is an increased rate of food insecurity (13.2%) in principal cities in metropolitan areas. While many imagine major cities as being bustling and full of different grocery stores and markets, an area only needs to be farther than 1 mile away from a grocery store to be considered located in a food desert. Households in rural areas need to be farther than 20 miles from a grocery store or supermarket to be a part of a food desert. Due to the lack of access to fresh, quality food, households in food deserts often depend on convenience stores for their nutritional needs, which mostly offer sugarand fat-filled foods. These foods and this population's reliance on them has been a great contributor to the obesity epidemic impacting United States.

Food Insecurity in Ohio

The average cost of a meal in Ohio is \$2.76. Compared to the national average meal cost (\$3.02), Ohio's meal cost is relatively low, yet many people still live under the constant threat of food insecurity. There are nearly 1.75 million individuals experiencing food insecurity in Ohio, approximately 14.5% of the state's population. Thildren experience higher rates of food insecurity than adults do. In 2019, 510,030 children in Ohio went hungry because of food insecurity.

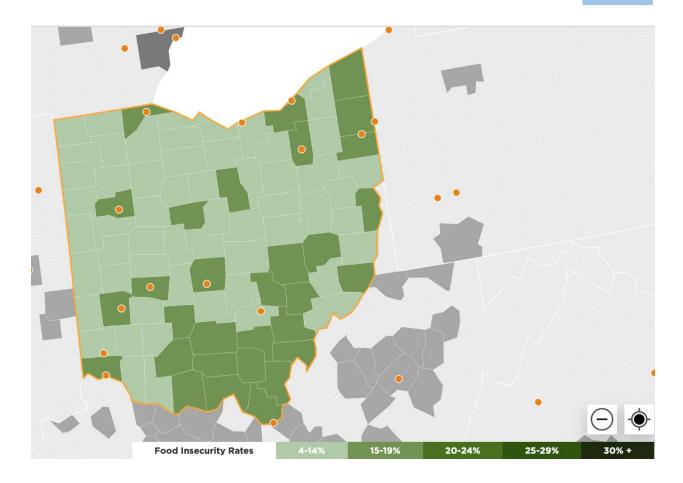
The correlation between average income and rates of food insecurity are illustrated in the table to the right. According to Feeding

Most food secure counties				
County	Rate of Food Insecurity	Average Household Income		
Delaware	8.10%	\$100,229		
Putnam	8.90%	\$61,161		
Most food insecure counties				
County	Rate of Food Insecurity	Average Household Income		
Athens	19.30%	\$37,191		
Cuyahoga	18.40%	\$46,784		

America – Map the Meal Gap, the most food secure counties in Ohio are Delaware County and Putnam County while Athens County and Cuyahoga County are the most food insecure. It is important to note that Cuyahoga County is home to 76,732 Hispanic/Latino Ohioans, which makes up 6.2% of the county's population. Therefore, a careful review of average household income in counties with dense Hispanic/Latino populations should be monitored to track the potential correlation between income and food access.

In Ohio, food insecure regions are dispersed through urban and rural areas. The map on page 11 illustrates the food insecure zones with a higher prevalence in the upper northeast region and the southeast with significant clusters in central Ohio as well.¹⁷





The map above highlights food insecure regions, which with the exception of southeast Ohio, represent areas with significant Hispanic/Latino demographic presence.

According to a 2014 USDA report, the Ohio counties with the most grocery stores per 1,000 people were Perry, Franklin, Cuyahoga, Fayette, Wayne, Ashland, Paulding, Logan, Harrison, Champaign, Holmes, Belmont, Noble, Guernsey, and Wyandot counties. Those with the least grocery stores were Licking, Pike, Van Wert, Portage, Carroll, Butler, Madison, Greene, Miami, Meigs, Fairfield, Delaware, Union, Monroe, and Vinton counties.¹⁸

The counties with the most grocery stores per 1,000 people tended to be small counties with a solidly middle-class median income. There are exceptions, however, such as Franklin and Cuyahoga counties which are home to Columbus and Cleveland—Ohio's largest cities. Although Delaware County was found to have one of the least amounts of grocery stores (17, in fact) per 1,000 people, it is still listed as the state's most food secure county. This can be attributed to its high median household income which facilitates access to a variety of healthy, nutritious sources of food. On the other hand, most counties with the least amount of grocery stores per 1,000 people tended to be small and rural with median household incomes that were well below the statewide average.¹⁸

In 2018, researchers at The Ohio State University surveyed more than 650 households in Franklin County, where 74,816 HL Ohioans lived that year, and found that almost a third of the households

studied were food insecure. Around 32% experienced low or very low food security and were at risk for experiencing hunger and likely missing school or work. Of the households that were surveyed, 26% were not satisfied with their ability to access food and 27% said it wasn't easy to find fresh fruits or vegetables even though 86% said nutritional value was important to them while shopping. Furthermore, researchers audited 90 stores where participants in the study shopped. The stores may have some fruits, vegetables, and other wholesome foods, but the offerings are limited, according to study lead author Michelle Kaiser, an assistant professor of social work at the university. Traditional full-service grocery stores are increasingly leaving low-income areas, so those with food insecurity often use carry-outs, corner stores and drug stores that house partial markets.¹⁹

In 2015, The Ohio State University's Kirwan Institute for the Study of Race and Ethnicity partnered with the Mid-Ohio Foodbank to conduct a research study centered around how to better provide service to Ohioans who accessed the Foodbank. They acknowledged that the changing nature of poverty had strong effects on how food security affects the population of Ohio, particularly Franklin County, where the majority of their research took place. The study reiterated the link between poverty and food insecurity. One part of the study analyzed was focus groups, which brought to light many issues affecting individuals affected by food insecurity. Participants expressed significant psychological stress of being unable to provide for themselves and their families. The study also touched on how the size, growth, and limited public transportation imposed a significant challenge on the rural residents, the elderly, those without cars, and the disabled.²⁰

Food Insecurity Among Hispanics/Latinos

As of 2018, there are over 59.9 million Latinos living in the United States, equating to 18% of the national population. These numbers effectively make them the nation's largest ethnic or racial minority. While many households experience the negative impacts of food insecurity, minority families find themselves overrepresented in the food insecure population. After conducting a study, the United States Department of Agriculture found the following concerning statistics regarding food insecurity in Latino communities:

- 18.3% of Latinos live below the poverty line.²²
- 16.2% of Latino households are food insecure.²²
- 16.8% of Latino households with children are food insecure. 22

The health outcomes of the Hispanic/Latino population is defined by a variety of factors, including lack of health insurance, language/cultural barriers, and lack of preventative care. Hispanics/Latinos are the most uninsured ethnic/racial group in the United States, resulting in increased rates of negative health outcomes. ²⁵

While there is little to no disparity between Hispanic/Latino Ohioans and White Ohioans regarding obesity and living in food deserts, Hispanic/Latino Ohioans fare far worse in several areas when compared to White Ohioans, including being more likely to be uninsured²³, more likely to live in poverty, and more likely not to graduate high school.¹

Contributing Factors

In 2017, a study by the University of Southern California's Center for the Study of Immigrant Integration and the Center for American Progress found that that 50% of all Hispanic/Latino families across the United States reported at least one undocumented member in their households. Undocumented immigrants are not eligible for public benefit programs, including the Children's Health Insurance Program (CHIP), Supplemental Nutrition Assistance Program (SNAP), and Temporary Assistance for Needy Families (TANF). Significant amounts of households who receive emergency food assistance also receive assistance from the Supplemental Nutrition Assistance Program (SNAP). However, Hispanic/Latino households are less likely to receive assistance from SNAP. The inability of one or more members to receive this federal aid greatly raises the probability of a household being food insecure.²⁴

In Ohio, 1 in 3 Hispanic/Latino individuals live in either Cleveland, Columbus, Lorain, or Toledo. While there is a large number of Hispanic Ohioans in urban counties, the Hispanic /Latino population make up a higher percentage of the population in rural counties.¹

Considering that Hispanic/Latino Ohioans have a lower median household income of \$45,000 than the overall statewide income of \$56,000, and the fact that increased

ніѕра	nic Populatio	n by County: 20	
Total Hispanic Population		Percent of County	
		Population	
Cuyahoga	76,732	Defiance	10.39
Franklin	74,816	Lorain	10.29
Lorain	31,642	Sandusky	10.09
Lucas	31,271	Fulton	8.99
Hamilton	28,177	Henry	7.89
Butler	18,601	Lucas	7.39
Montgomery	16,460	Huron	6.99
Mahoning	14,677	Mahoning	6.49
Summit	12,150	Putnam	6.29
Lake	10,737	Cuyahoga	6.29
Stark	8,011	Franklin	5.79
Wood	7,432	Wood	5.79

numbers of Latinos live in suburban and rural areas, there are clear trends that contribute to food insecurity. Low income levels, lack of access to transportation, and habitation in food deserts contribute to food insecurity for this ethnic minority.

The Impact and Consequences of Food Insecurity

While the average family income increased 0.8% in 2018 to \$61,937²⁶, a significant number of households continue to find themselves food insecure due to housing, transportation, healthcare, and food costs. Individuals use different coping strategies, which often lead to unhealthy food decisions resulting in increased disease rates and general poorer overall health. The figure to the right shows the cycle that a significant number of households find themselves under when experiencing food insecurity.²⁷ The high cost of food has a significant impact on a household's budget. Frequently, households that struggle with food insecurity are also challenged with being able to



afford their housing, transportation, utilities, and other basic needs. High meal costs can force food insecure households to make difficult choices that may, in turn make it difficult to achieve long-

term economic success. Oftentimes, these households may forsake a meal in order to afford these other payments. Higher meal costs tend to correlate with lower rates of homeownership, higher rent, and a higher rental burden (when a household pays 35% or more of their income on rent). When families are forced to choose between several different expenses, food is often left last.

Food insecure households have trouble meeting their basic needs, including providing adequate nutrition and refilling their medical prescriptions. Not meeting nutritional needs can have adverse effects on an individual's health. These effects, coupled with struggling to make ends meet can lead to poorer mental and physical health. According to The Feeding America Network, families reported having to choose between:

- Food and medical care (66%)¹⁵
- Food and utilities (69%)¹⁵
- Food and transportation (67%)¹⁵
- Food and housing (57%)¹⁵

Disadvantaged households meet their basic needs by using coping strategies. Decisions are based on different strategies, including to support an individual's health, to support good short-term choices, but with the risk of negative long-term impact on a family's health. Of the households served by the Feeding America Network, 55% reported using three or more coping strategies, including:

- Receiving help from friends (53%)¹⁵
- Watering down food or drinks (40%)¹⁵
- Purchasing inexpensive, unhealthy food (79%)¹⁵
- Selling or pawning personal property (35%)¹⁵
- Growing food in a garden (23%)¹⁵

Ultimately, the lack of access to enough healthy food harms children, working-age adults, people with disabilities, and seniors.²⁸ Food insecurity negatively influences the health, learning, and productivity of the households who suffer from it.

Academic/Cognitive Problems

Currently, there is little research on how food insecurity specifically affects Hispanic/Latino children and their academic/cognitive development. However, research does show that food insecurity leads to a series of developmental consequences for students, including but not limited to impaired academic performance in reading and mathematics.²⁹

A significant number of people who suffer from food insecurity also tend to suffer from iron deficiency.³⁰ "Low prenatal iron levels are associated with poor performance in language comprehension tests and inability to follow directions over the first five years of a child's life. Iron deficiency is also related to delays in socioemotional, cognitive, motor, and neurophysiological development."³¹ Expectant mothers who do not have enough food to stay satiated have the potential to deeply affect a child's development during their schooling years. Children living with food insecurity were twice as likely to exhibit persistent symptoms of hyperactivity and inattention

during class. Diets low in iron and high in sugar were linked to hyperkinesia, inattention, and poor information retention. Once a healthy diet was established for these children, a significant number showed improved attention and lower levels of attention deficit hyperactivity disorder (ADHD). The lack of food experienced by mothers in food insecure households can deathly affect their child before it is even born, and continued food insecurity can have devastating effects on a child's early stages of development. The Hispanic/Latino population in Ohio is young. There are over 117,000 Hispanic/Latino K-12 students in Ohio, the impact that food insecurity could have on them would be detrimental to their academic success.

Outside of the household, there has been an increasing focus on how food insecurity is affecting college students. Given the high number of young Latinos in Ohio who will soon enter higher education, it is important to explore this issue. The United States Government Accountability Office reviewed 31 studies concerning how food insecurity linked to decreased academic performance. The details of this survey may point to trends and factors at the national level that provide a baseline for Hispanic/Latino Ohioans and identify critical areas.

Food Insecurity in College Students: Reviewing a GAO Report

There has been an increasing focus on studying the effects of food insecurity on college students, alongside how it affects their academic success when compared to their peers. The Government Accountability Office (GAO) surveyed 7.3 million low-income students at 14 colleges. They gathered the following data about food insecurity on households with college students:

- 11% of households with a student in a 4-year institution³²
- 17% of households with a student in community college³²
- 14% of households with a student in a vocational school³²

Additionally, the data gathered also shows the following statistics:

- The average age of a college student is 26 years old³²
- 64% of students worked at least part time³²
- 39% of undergraduate students lived at 130% or below of the poverty line³²
- 31% of students were first-generation college students³²
- 31% of students received SNAP benefits³²
- 25% of college students were single parents³²
- 22% of students were disabled³²
- 15% of students were homeless³²
- 11% were formerly in foster care³²

The study found that almost 2 million at-risk students eligible for Supplemental Nutrition Assistance Program (SNAP) benefits did not report receiving them in 2016. Similarly, a significant number of at-risk college students suffer from other limiting factors, such as being a first-generation college student, or being a single parent. This combination of limiting factors can severely influence the academic success of a student.³²

Unfortunately, a significant number of students still live with food insecurity even after receiving federal and state financial aid and separate scholarships. The GAO Report has suggested that reductions in the supply of financial and state aid coupled with the increasing number of students and increase in price of attendance lead to students living with food insecurity. Limiting factors, such as being from a low-income household or being a single parent compound with food insecurity to put at-risk college students at increasing rates of stress and anxiety, leading to significantly lower academic success when compared to their peers.³²

Successful attainment of a post-secondary degree helps people better the foundation upon which they build their lives. A college degree can help people get further in life and increases their likelihood to foster financial sustainability. Twenty-seven percent of Hispanic/Latino Ohioans have earned a post-secondary degree compared to 38% of all Ohioans. Twenty percent of Hispanic/Latino Ohioans have pursued some amount of college classes but have no degree. As explained previously in this report, there are numerous studies which indicate that food insecurity can have a significant, detrimental impact to the development of students. Hispanic/Latino Ohioans are young and face complex, extended family responsibilities that could impact their ability to complete higher education. Food insecurity could be the last straw that prevents them from achieving their educational goals, which could have a negative impact on their long term economic and emotional well-being.

Mental/Behavioral Health

A growing body of literature has begun to suggest that child hunger is an early predictor of depression and suicidal ideation during late adolescence and young adulthood. Researchers believe that nutritional deficiencies caused by hunger and food insecurity are the cause of depression later in a child's life. Alongside these effects, low-income households with children experiencing food insecurity report more behavioral and emotional problems than their food secure counterparts. Children of food insecure households may be more likely to exhibit hyperactivity, aggression, and anxiety. Food insecurity during a child's adolescent period has been linked to higher rates of mood, behavioral, and substance abuse disorders.³¹ A similar link has been found between food insecurity and mental health issues in the adult population. Adults who experience food insecurity face increased levels of stress, anxiety, and depression, particularly mothers and caregivers.³³

Food insecurity has serious effects on a person's mental health. For the Hispanic/Latino population living in poverty, there is a prevalence of mental health problems caused by food insecurity. The prevalence of factors such as limited English proficiency, lack of proper documentation, embarrassment, guilt, fear, and a lack of understanding about how to access resources may increase psychological distress on a number of Hispanic/Latino Ohioans and place them at a higher risk of food insecurity. Knowing that 5.1% percent of all the Hispanic/Latino population live under the threat of very low food security, it is concerning to see that the same population is 4.43 times more likely to report serious psychological distress.³⁴

Physical/Medical Problems

There is a robust relationship between food insecurity and poor health. Food insecurity can manifest itself with physical symptoms, such as stomach pain, dizziness, headaches, reduced

strength, hyper-sensitivity to noise, light and cold, and poor motor control. Experiencing these physical conditions negatively influences an individual's ability to complete daily tasks, such as working, and negatively influences an individual's quality of life. For households already dealing with food insecurity, these symptoms continue to stifle their mobility towards a better quality of life. Furthermore, long-term food insecurity has been linked to chronic diseases, including diabetes, metabolic syndrome, anemia, and poor dental outcomes, among others. A significant number of food insecure households served by the Feeding America network have members living with hypertension (58%) or diabetes (33%). Expectant mothers who are food insecure are at a higher risk of having children with birth defects.³⁵

The American Academy of Pediatrics has reported that children exposed to early life toxic stress are at high risk to adverse health conditions later in life, such as cardiovascular disease, cancers, asthma, obstructive pulmonary disease, and autoimmune disease. They defined toxic stress as, "extreme, frequent or extended activation of the stress response accompanied by the absence of a supportive adult." Children who experience extended periods of hunger were more likely to have poorer overall health. Multiple periods of extended hunger were associated with a higher likelihood of chronic conditions, when compared to children who never experienced extended periods of hunger.

The Hispanic/Latino population is 50% more likely to die from diabetes or liver disease when compared to the White population, a statistic aided by the increased rates of food insecurity they face. Alongside food insecurity, Hispanic/Latino have the highest uninsured rates of any racial/ethnic group across the United States. Lack of health insurance leads to a lack of access to proper preventative care. When this lack of access is mixed with food insecurity, it creates devastatingly negative health outcomes for the Hispanic/Latino population.³⁷Additionally, food insecurity has been linked to increased substance abuse among Hispanic/Latina women. ³⁴

Obesity

Approximately 13.7 million (18.5%) of children and adolescents aged 2-19 years suffer from obesity in the United States.³⁸ Researchers have hypothesized that a partial cause of this current obesity epidemic is "related to more restrictive and pressuring maternal feeding styles compared with food-secure mothers." Controlling feeding styles do not allow a child to form their own self-regulatory eating behaviors, leading to future childhood obesity. Among adults, there have been several studies concerning the food insecurity-obesity connection that have documented a strong and positive correlation among women, but a limited correlation has been shown in men.

Hispanic/Latino children tend to experience more cases of obesity at more severe rates when compared to White youths. When studying children 2-5, Hispanic/Latino tended to experience obesity at 4 times the rate than their White counterparts. In children 6-11, the results are less severe but still very concerning, experiencing obesity at twice the rate when compared to White children. The Hispanic/Latino adult population have the highest prevalence of obesity of all adult ethnic/racial populations. Almost half (47.0%) of all Hispanic/Latino adults live with obesity. These statistics are worrisome considering that heart disease, type 2 diabetes, stroke, and a plethora of cancers are all closely tied to obesity.

Conclusions

Food insecurity continues to be a worrying issue across the nation and Ohio for low-income, urban, and rural populations. As illustrated throughout this report, there is lack of data to demonstrate the impact that food insecurity has on Hispanic/Latino families. Relevant inferences have been highlighted for Hispanic/Latino Ohioans based on national data; however, it is imperative to study, measure, track and report on the specific impact of food insecurity for Ohio's Hispanic/Latino community. This segment of the population has more than doubled since 2000 and its growth has impacted demographically every county of the state. As more Latinos move from cities to suburbia and rural communities, it is critical to evaluate the impact that access to food sources will have in the health and well-being of this young and thriving population.

Additionally, the Commission encourages Ohio's General Assembly, Department of Health, Department of Mental Health, Ohio's Department of Education, and other relevant governmental bodies to invest resources in understanding the unique needs of those susceptible to food insecurity (age, race, ethnicity, etc.) when formulating policies that have far-reaching effects on the population. At the local level in counties with high Hispanic/Latino demographics, the commission will work to increase awareness about this issue. We will encourage county and city governments to assess the impact that public transportation and other key factors play on food access.

Moreover, the Commission will support plans to continue to strengthen educational programs about food security, access to local food resources, programs that aim to increase availability of fresh produce in food deserts, and keeping full-service grocery stores in low-income areas. Also, we will plan to bring awareness about food insecurity and its impact through our annual Latino Health Summit and Latino Education Summit during 2020.

Finally, the Commission will continue its work to encourage high Latino participation in the Census 2020 count, as an accurate knowledge of demographic data is crucial in assessing the impact of food insecurity throughout Ohio.

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